107000010349

(Requestor's Name)
(Address)
(Address)
(411)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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B. BOSTOK DEC 31 2013

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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

FLM Therapy, LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Francine McNeill

(Namc of Person)

FLM Therapy, LLC

(Firm/Company)

830 Bentley Green Circle

(Address)

Winter Springs, FL 32708

(City/State and Zip Code)

For further information concerning this matter, please call:

Francine McNeill

,407 \ 754-823

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

ρ \$25.00 Filing Fee

ρ \$30.00 Filing Fee & Certificate of Status β \$55.00 Filing Fee &
 Certified Copy
 (additional copy is enclosed)

ρ \$60.00 Filing Fee.
 Certificate of Status &
 Certified Copy
 (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

410.4	10007
2. The Articles of Organization were filed on 1/24	and assigned document numbe
L07000010369	
3. The date the dissolution was approved: $\frac{12/20/2}{2}$	2013
4. A description of occurrence that resulted in the lin 608.441, Florida Statutes, (copy 608.441 on back	mited liability company's dissolution pursuant to section cover letter).
Ceased Operations	
	1.2
	338
	2, 2
5. CHECK ONE:	<u> </u>
	the limited liability company have been paid or discharged.
The Color Contractions and nationales of the	
-OR-	
-OR- Adequate provision has been made for th	ne debts, obligations and liabilities pursuant to s. 608.4421.
-OR- Adequate provision has been made for th	
-OR- Adequate provision has been made for th 6. All remaining property and assets have been distr	ne debts, obligations and liabilities pursuant to s. 608.4421.
 OR- Adequate provision has been made for the 6. All remaining property and assets have been distrights and interests. 7. CHECK ONE: There are no suits pending against the co 	ne debts, obligations and liabilities pursuant to s. 608.4421.
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FILING FEE: \$25.00